

ATTORNEY DOCKET N<sup>o</sup>: 02-6220  
EXPRESS MAIL LABEL N<sup>o</sup>: EV 303 409 336 US

PATENT



**ORIGINAL PATENT APPLICATION TRANSMITTAL LETTER**

MAIL STOP PATENT APPLICATION  
COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

Transmitted herewith for filing is the patent application of:

**INVENTORS:**

Christopher McCarty  
4920 Kashmir  
Colorado Springs, CO 80920  
Citizen of United States

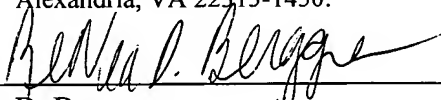
Jeffrey Rogers	Bruce Trunk
2520 Lyncrest Drive	1230 Fawnwood Rd
Colorado Springs, CO 80918	Monument, CO 80132
Citizen of United States	Citizen of United States

Title: **Alternate Non-Volatile Memory for Robust I/O**

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**CERTIFICATION UNDER 37 C.F.R. §1.10**

I hereby certify that this Original Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date, December 8, 2003 in an envelope as "Express Mail Post Office to Addressee", Mailing Label N<sup>o</sup> EV 303 409 336 US, with sufficient postage, addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
\_\_\_\_\_  
ReNea D. Berggren

DATED: December 8, 2003

**1. Type of Application**

This is an Original Application.

**2. Benefit of Prior U.S. Application(s) (35 U.S.C. § )**

<u>USSN</u>	<u>Filing Date</u>	<u>Inventor(s)</u>	<u>Status</u>
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**3. Papers Enclosed That Are Required for Filing Date under 37 C.F.R. §1.53(b) (Regular) or 37 C.F.R. §1.153 (Design) Application**

Seven (7) Pages of Specification;  
Five (5) Pages of Claims;  
One (1) Page of Abstract; and  
Four (4) Sheets of Drawing Figures.

**4. Additional Papers Enclosed**

None.

**5. Declaration or Oath**

The signed Declaration and Power of Attorney is attached

**6. Inventorship Statement**

The inventorship for all the claims in this application are the same.

**7. Language**

English.

**8. Assignment**

The signed Assignment is attached. The Recordation Form Cover Sheet is enclosed.

**9. Certified Copy**

None are required.

**10. Fee Calculation (37 C.F.R. §1.16)**

BASIC FEE							\$770.00
EXCESS CLAIM FEE							
TOTAL OVER TWENTY	25	-20	=	5	X \$18.00		\$90.00
INDEPENDENT OVER THREE	3	-3	=	0	\$86.00		\$0.00
MULTIPLE DEPENDENT				0	\$290.00		\$0.00
ASSIGNMENT RECORDATION FEE					\$ 40.00		\$40.00
TOTAL FILING FEES							<u><u>\$900.00</u></u>

**11. Small Entity Statement(s)**

None required.

**12. Request for International - Type Search (37 C.F.R. §1.104(d))**

None required.

**13. Authorization to Charge Fees**

The Commissioner is hereby authorized to charge the filing fees of **\$900.00** to Deposit Account N° 12-2252. Please charge any underpayments related to this filing or credit any excess to Deposit Account N° 12-2252. A copy of this *Transmittal* is enclosed for accounting purposes only.

Please direct all correspondence and telephone calls to:

**CUSTOMER NO. 24319**  
PETER SCOTT  
LEGAL DEPARTMENT - IP  
LSI LOGIC CORPORATION  
M/S D-106  
1621 BARBER LANE  
MILPITAS, CA 95035

DATED: December 8, 2003.

Respectfully submitted,  
Christopher McCarty et al.,  
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By Walter J. Malinowski  
Walter J. Malinowski  
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**This Transmittal Ends With This Page.**